

Form CPF M 102: Campaign Finance Report

Municipal Form

Office of Campaign and Political Finance

CITY OF CAMBRIDGE ELECTION COMMISSION

E:1-	AL.
File	with:

Commonwealth [Massachusetts
File with: City or Town Clerk or Election Commission
Please print or type all information, except signatures.
Fill in dates: Reporting Period Beginning January 2003 Ending October 9 2003
Type of report: (Check one) □8th day preceding preliminary □8th day preceding election □30 day after election □year-end report □dissolution
Toseh G. Grassi Full Name of Candidate (if applicable) Carbridge Schal Committee Office Sought and District Residential Address Residential Address Tel. No. (optional) Committee to Le-Elect Toe Grass, Committee Name Dawn Marie Grassi Name of Committee Treasurer Ambridge Street Committee Name Committee Name Committee Name Committee Name Committee Name Committee Mailing Address
SUMMARY BALANCE INFORMATION: Line 1: Ending balance from previous report Line 2: Total receipts this period (page 2, line 11) Line 3: Subtotal (line 1 plus line 2) Line 4: Total expenditures this period (page 3, line 14) Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Contributions Subtotal (line 1 plus line 2) \$ 3,806.20 \$ 499.60 Line 5: Ending balance (line 3 minus line 4) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Contributions Subtotal (line 1 plus line 2) \$ 3,806.20 Line 5: Ending balance (line 3 minus line 4) Subtotal (line 1 plus line 2) Line 6: Total in-kind contributions this period (page 4) Line 7: Total (all) outstanding liabilities (page 4) Line 8: Name of bank(s) used Contributions Line 8: Name of bank(s) used Contributions
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, including all contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury: Colored Statement Colored Stat
Affidavit of Candidate: (check 1 box only) Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign finance activity, of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. I have not received any contributions, incurred any liabilities nor made any expenditures on my behalf during this reporting period. Candidate without Committee OR Candidate with independent activity filing separate report I certify that I have examined this report including attached schedules and it is, to the best of my knowledge and belief, a true and complete statement of all campaign

finance activity, including contributions, loans, receipts, expenditures, disbursements, in-kind contributions and liabilities for this reporting period and represents the campaign finance activity of all persons acting under the authority or on behalf of this committee in accordance with the requirements of M.G.L. c. 55. Signed under the penalties of perjury:

Candidate signature (in ink)

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

number on each page.

Date Received	()	Amount		Occupation & Employer (for contributions of \$200 or mo	
9/6	Maryan Donofrio 120 Gore Street, Cambridge	100	Oo		
9/26	Mariel Barros 4 Marion Street Cambridge	150	∞		
9/26	Herry Korecki 195 312 Street Cambridge	100	00	ay .	
9/29	Anthony Brincolo 170 Gone Street #319, Carbridge	100	α		
9/29	Anthony Gelaminsky 1 Yerx a Road Cambridge	100	00		
10/4	Pat Daley 57 Rindge Ave Canbridge	100	00		
10/5	Micola Biasella 110 Thornaile St. Cambridge	/00	CO		
1015	Rich Verbeti, 28 winto Street, Cambridge	100	00		
	V				
	•				
		Andrews and the second			
		·			
Line 9:	Total receipts in excess of \$50 (or listed above)	850	00		
Line 10: 7	Total receipts \$50 and under* (not listed above)		00		
Line 11: 7	TOTAL RECEIPTS IN THE PERIOD	302 S	00	Enter on page 1, line 2	

^{*} If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized above.

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SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Am	ount
10/04	Staples	282 Mystic Ave Medical MA 02155	Office Syllies Postage Office Syllies	185	02
6/1/03	U.S. Post OFFice	Bostom MA 02205	Postage	400	00
10/15/03	Staples	335 Washington of Woburn, MA 0184	Office Syllies	54	58
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eto o constante de la constante					
			-		<u> </u>
		Line 12	Expenditures over \$50	(20	(0
				639	60
	Enter on page 1, line 4		Expenditures \$50 and under* :TOTAL EXPENDITURES	60	00

^{*}If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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Schedule E **Municipal Form** Disclosure of Assets Statement

Office of Campaign and Political Finance

of Massachusetts

File with: City or Town Clerk or El	ection Commissi	on The large large largest of shorts	parest correct constants in he	
This form should be to Committee Name:	filed by all candid	lates and committees with ea	ch year end and each dissoluti	on report.
그 사용하다 중요 그는 사람들이 살아 있다.		nd committees must fill ir		
Part A:				
No assets* were acquired or o	lisposed of by thi	s candidate/committee during	g the period covered by this st	atement.
110 23303				
Part B: Assets acquired: List all assets acquired	uired since the co	mmittee last filed this statem	ent. If this is the first Schedu	le E you have filed, list
all assets.				A AT 1
Asset Include year, model or other identifying information, if applicable.	Date Acquired	Present Location	Manner Acquired	Cost/Value
	•		148.50	
. 1.				

Assets disposed of: List all assets sold, traded or transferred during the reporting period covered by this statement.

Asset Include year, model or other identifying information, if applicable.		Date Disposition to: Acquired Name and Address		Date and Manner of Disposition	Disposition Value Attach statement of how value is determined.	
MA						

Assets acquired by a political committee must be used for the political purpose for which the committee is organized and must remain the property of that committee. Assets may be disposed of at any time, but must be disposed of prior to dissolution.

*An asset is defined as any one item that has a useful life of more than one year, would be depreciable in a normal business environment, and has a cost/value of \$1,000 or more at the time of acquisition.

Signed under the penalties of perjury:

Signed under the penalties of perjury:

Attach additional sheets, if necessary, to disclose all assets acquired or disposed of in a reporting period.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
	M/A			
		Line 15: In	n-kind over \$50	
	*	Line 16: In	n-kind \$50 and under	
	Enter on page 1, line 6	Line 17: T	otal In-kind	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
4401	Joseph G. Grass	393 Canbridge Street	Liabilitie From Previous reports	\$5,763.65
11/4/01	ProPrinters	483 Meletoral Smed Solverille MA 02145	Printing	\$1,334.46
	Enter on page 1, line 7	Line 18: OUTSTANDING	G LIABILITIES (ALL)	11.880,5

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

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